

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

PAGE 1 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) For Our Future		FEC IDENTIFICATION NUMBER ▼ C C00620971	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Mack-Sumner Communications, LLC [MEMO ITEM] *		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 26 / 2016	
Mailing Address 2001 N Beauregard St Ste 420		Amount 38168.09	
City Alexandria	State VA	Zip Code 22311-1750	Transaction ID : VSG8M9TQJP3
Purpose of Expenditure Estimated Cost for Direct Mail Services		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate CLINTON, HILLARY RODHAM, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

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Mailing Address 2001 N Beauregard St Ste 420		Amount 38168.09	
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Purpose of Expenditure Estimated Cost for Direct Mail Services		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate TRUMP, DONALD J. , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bidel-Niyat, Shirin, , ,

[Electronically Filed]

Date

MM / DD / YYYY
10 / 27 / 2016

Signature